



3 Licensing and Postgraduate Training Authorization Letter (PTAL) Processes

This section includes a description and analysis of the current Physicians and Surgeons licensing and Postgraduate Training Authorization Letter (PTAL) environment including application inventory, workload, processes, workflow, staff roles and responsibilities, and observations related to the environment.

The Licensing and PTAL processes described in this section include:

- Initial licensure applications for Physicians and Surgeons for United States and Canadian (US/CAN) and International Medical School Graduates (IMG)
- Applications for a PTAL
- License renewals

Applications and Application Inventory

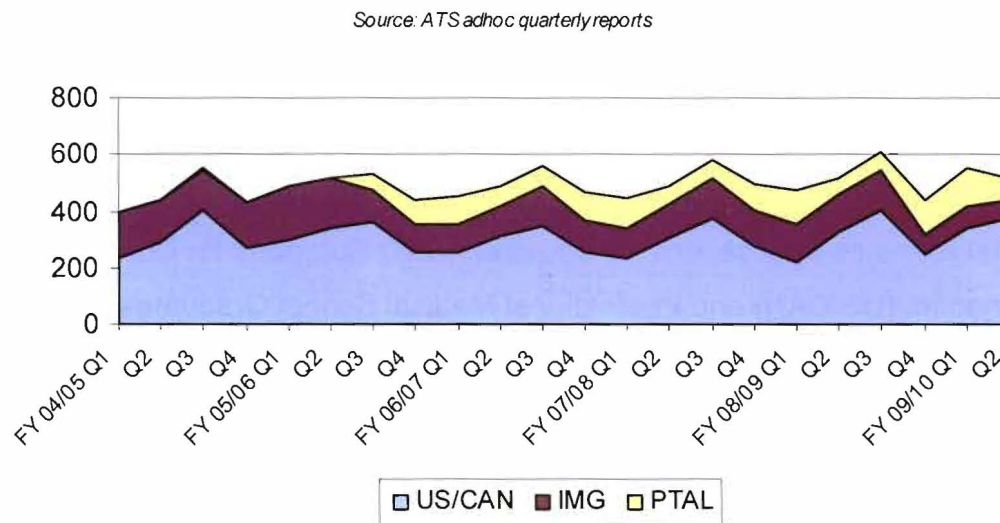
Applications are received by MBC throughout the year for applicants seeking medical licensure or IMGs seeking a PTAL. A PTAL is required for IMGs seeking postgraduate training in California-based postgraduate training programs.

The figure below shows a quarterly view of the applications received starting in the first quarter (Q1) of Fiscal Year 2004/05 (FY 04/05) and identifies “spikes” in applications receipts through the year. PTAL applications and IMG applications for licensure remain relatively constant through the years, with slight increases in Q1 (July – September). US/CAN applications show the largest “spike” in Q3 (January – March). In FY 08/09, up to 600 new applications per month were received during Q3. The “peak period” is attributed to an increase in US/CAN applications seeking licensure on/before July 1 to continue residency programs and start fellowship programs. The fluctuations in total application inventory and in specific types of applications (US/CAN, IMG and PTAL) require additional



workload and resource management to prevent a backlog. Additional overtime is used to address the increased inventory during these times.

Figure 2 – Quarterly view of applications received per month (average)



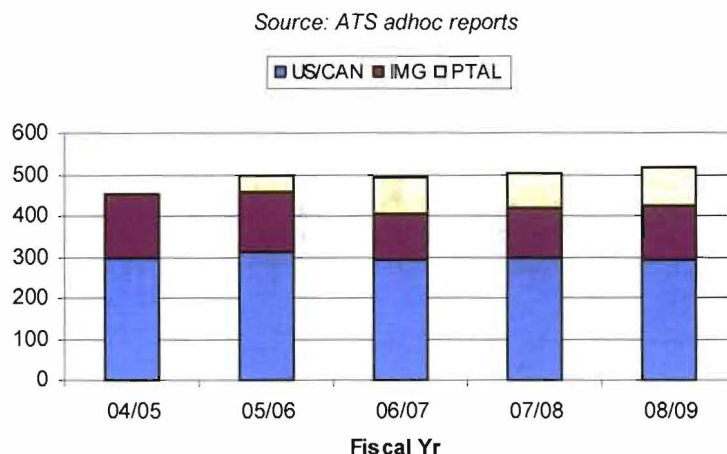
NOTES:

1. Data was provided by FY Quarter. Monthly average was calculated by dividing quarter total by three.
2. Data is as of January 11, 2010.
3. PTAL applications received a specific code in the Applicant Tracking System (ATS) starting in FY 05/06. Prior to that time, ATS did not differentiate between an IMG applicant seeking a PTAL or a license.

The figure below shows the average number of license and PTAL applications received by MBC per month over the past five fiscal years. During Fiscal Year 2008/09 (FY 08/09), MBC received an average of 520 new applications a month (130 per week) for a total of 6,200 new applications. The figure below also shows there has been a slight increase (average +/-3%) in application submission starting in FY 04/05 through FY 08/09.



Figure 3 – Annual view of applications received per month (average)



NOTES:

1. Data was provided by FY Quarter. FY quarters were totaled and monthly average was calculated.
2. PTAL applications received a specific code in the Applicant Tracking System (ATS) starting in FY 05/06. Prior to that time, a PTAL application was considered an IMG application in ATS.

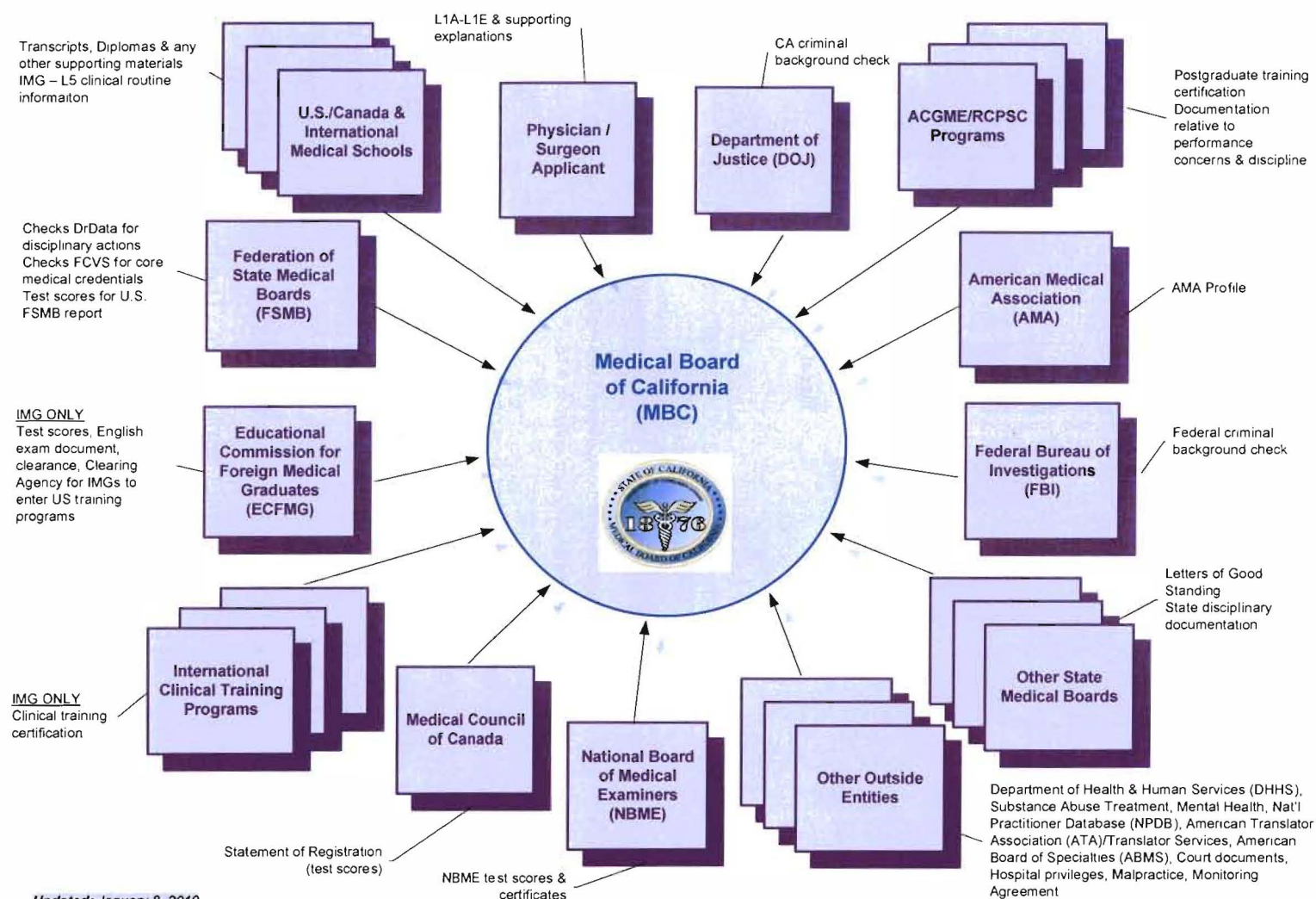
The application review process for licensure and PTALs entails a comprehensive evaluation of the applicant's qualifications. Requirements are based on State of California statutes and regulations. The application includes several components including the base application (L1A – L1E) as well as additional forms and supporting documentation. A complete US/CAN application requires a minimum of thirteen (13) types of documentation from external entities; with additional documentation needed for an IMG application. The figure below shows the external entities that provide supporting documentation in the PTAL and Licensing application process. The amount of required supporting documentation is dependent on the applicant's unique situation and information provided on the application.



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Figure 4 - External Entities in the PTAL and Licensing Application Process



Updated: January 8, 2010



Once all required documentation is submitted and reviewed, 99% of complete applications result in the issuance of a license or a PTAL. The time to complete the review of an individual application and render a licensure or a PTAL decision varies based on:

- Information provided in the application and supporting documentation
- The length of time to obtain all required information from external entities
- The workload of the Licensing Program Staff.

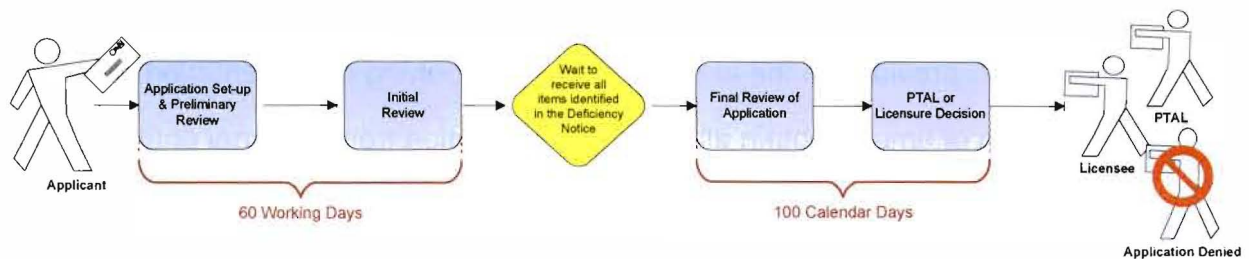
Regulatory Timeframes for Application Processing

Although the time to process an application varies, application processing is required to comply with regulatory timeframes. The figure below shows the PTAL and license application processing timeframes prescribed by Title 16, California Code of Regulations, §1319.4. From the date of application receipt³, the Licensing Program has 60 working days (approximately 90 calendar days) to complete the initial review and inform the applicant of any deficiencies in their application. Deficiencies can include missing or erroneous forms or information. After all deficiencies have been resolved and the application is deemed a completed application, the Licensing Program has 100 calendar days to inform the applicant of the PTAL or licensure decision.

³ The application is considered received when MBC receives both the application and application fees.



Figure 5 - Application Processing Timeframes



In addition to the application processing timeframes identified above, current regulations⁴ also authorize MBC to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

Inventory and Backlog

When applications are received by MBC, they become part of the inventory awaiting initial review. Applications are generally processed in the order they are received. The inventory will grow if, in any given time period, more applications are received than initial reviews are completed.

An application in inventory and awaiting initial review ages every day. The figure below shows the categories of *inventory awaiting initial review*: Under the current nomenclature, inventory awaiting initial review in the “over 90 calendar days” category is called *backlog*. All applications in backlog are not meeting the regulatory requirements for initial review. From an applicant’s perspective, the

⁴ CCR, Title 16 § 1306

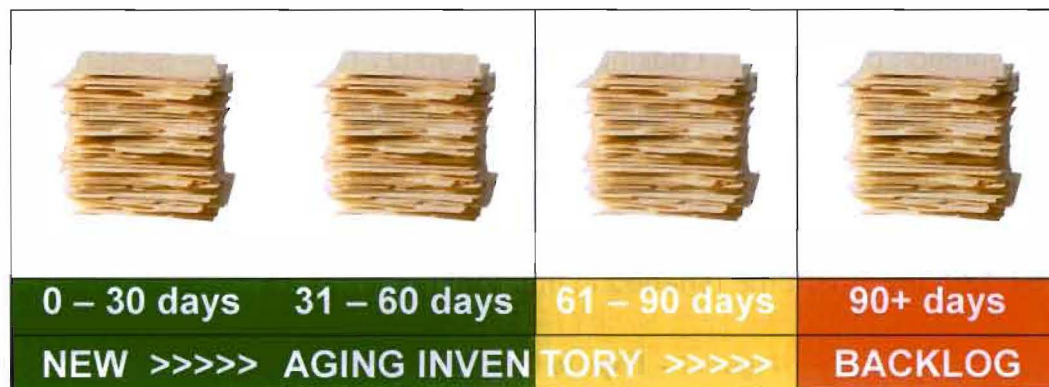


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backlog results in longer initial review period and ultimately a delay in a licensure decision.

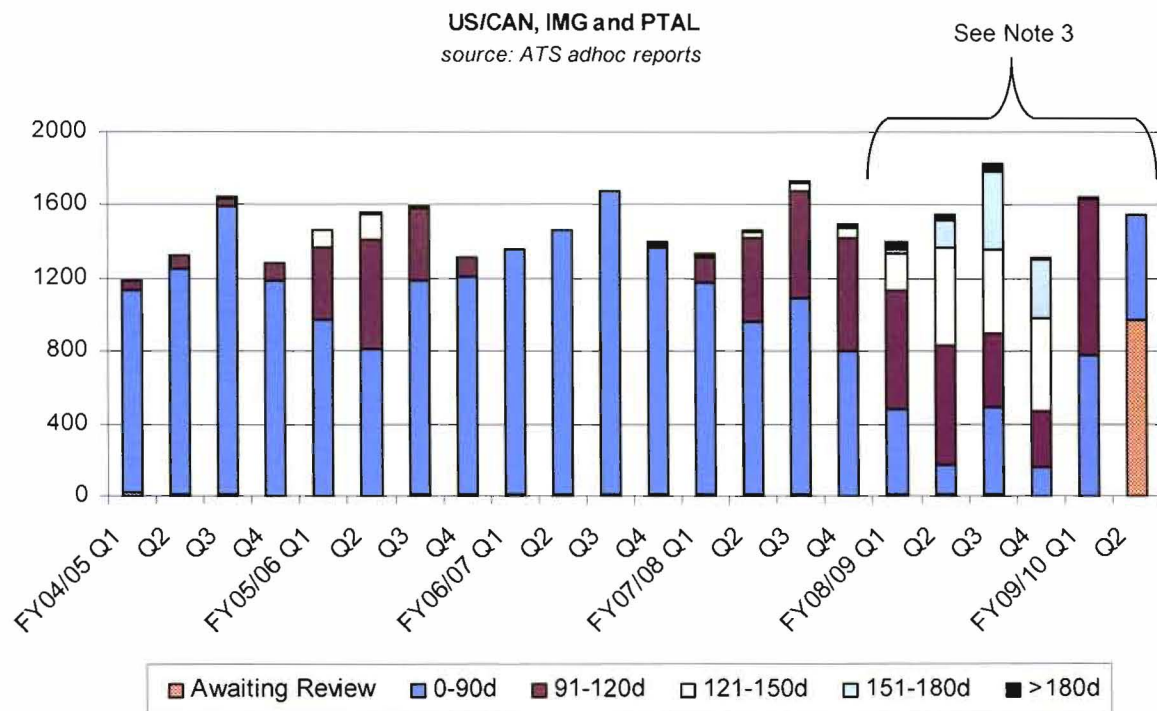
Figure 6 - Categories of Inventory Awaiting Initial Review





The BPR Study Team analyzed data the MBC Information Systems Branch (ISB) extracted from the Applicant Tracking System (ATS) for an ad hoc report. The report identified the length of time to complete an initial review for applications received *in a specific quarter*. The figure below provides a graphical representation of the data. Looking at FY 04/05 Q1 (July 2004 – September 2004), the chart shows almost all of the 1,200 applications received in that three-month timeframe had initial reviews completed within 90 days of receipt (shaded in purple), with a small amount of applications having the initial review completed in the 91-120 day timeframe (shaded in maroon).

Figure 7 – Days to Complete Initial Review



Notes:

1. This data provides the length of time to complete an initial review for applications received in the identified quarter.
2. Data is as of January 11, 2010.
3. Per Governor's Executive Order: Overtime (OT) eliminated Aug 1 to Oct 15 2008 (FY 08/09, Q1 and Q2), two (2) furlough days/mo Feb thru June 09 (FY 08/09 Q3 and Q4), three (3) furlough days/mo effective Jul 1 2009 (FY 09/10 Q1-Q4)
4. In FY 05/06 Q3, PTALs received a separate designation in the Applicant Tracking System (ATS). Prior to that date, PTALs were considered IMGs.



The figure also shows:

- Since FY 04/05 Q1, there have been two periods where a backlog has occurred. Typically for each backlog period, there was an increase in the length of time to complete the initial review for several quarters, before the backlog situation was eliminated.
- Applications received in FY 09/10 Q1 (July 2009 – September 2009) had significantly better initial review timeframes than the previous quarter, FY 08/09 Q4 (April 2009 – June 2009), indicating resolution of the backlog.

The Licensing Chief developed a plan to address the increased backlog and presented it to the Board's Executive Committee in October 2009. Based on feedback by the Board's Executive Committee, the Executive Director provided the following directives to the MBC Licensing Chief in October 2009:

- Eliminate backlog (defined as new applications not reviewed over 90 calendar days) by December 30, 2009.
- Efforts to eliminate backlog will have no adverse impact on the current volume of licenses and PTALs issued.

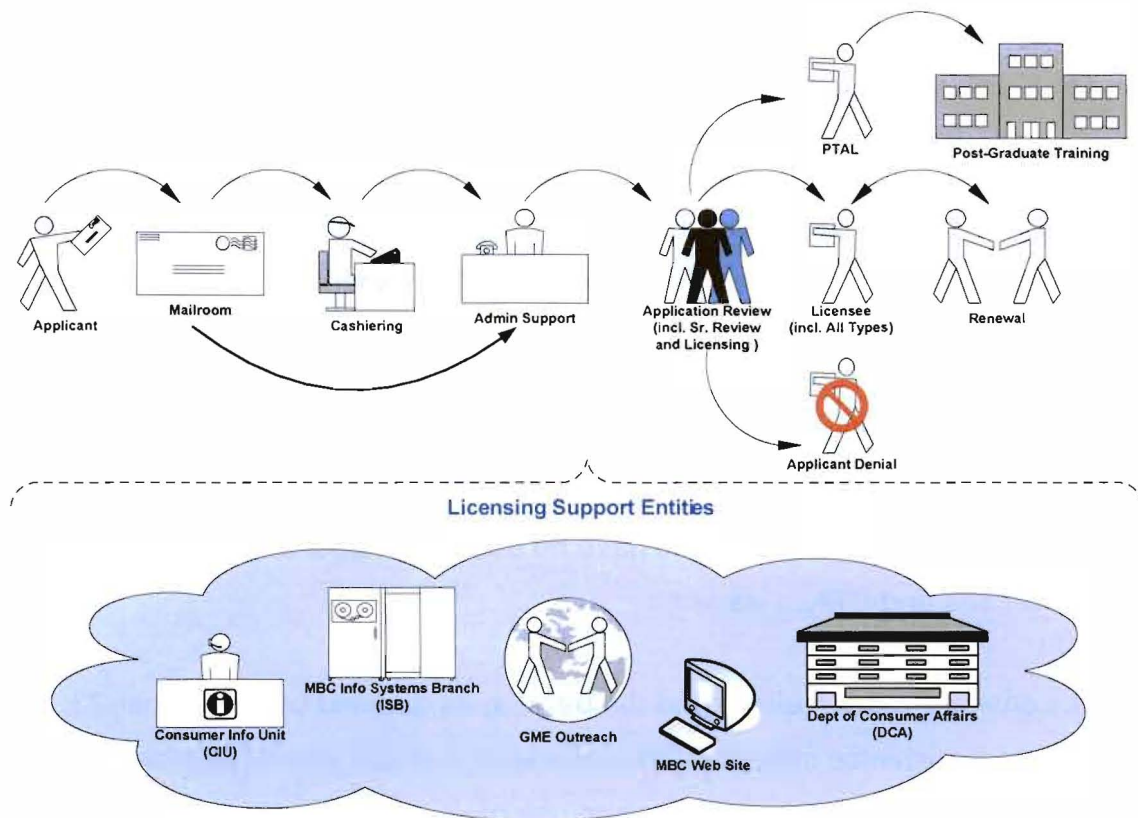
The Licensing Program eliminated the backlog as directed by December 23, 2009. There was no adverse impact on the volume of licenses and PTALs issued. Continued focus on aging inventory and use of several recently developed reports will prevent the future recurrence of the backlog.



Application Processing

The Figure below represents a high-level view of the licensing and PTAL processes. The icons shown below will be used throughout this section to describe the components within licensing and PTAL processes.

Figure 8 - Overview of PTAL and Licensing Processes



- STEP 1: Applications and supporting documentation are received from the applicant by the MBC Mailroom and opened. Any mail that contains payments is forwarded to Cashiering. If the mail does not contain payments, the mail goes directly to the Licensing Administrative Support Staff.



- STEP 2: Monies are processed by the MBC Cashiering staff. A report of the monies received by DCA Cashiering staff is reviewed by the MBC Cashiering staff. The Cashiering Staff forward the mail to the Administrative Support Staff for further processing.
- STEP 3: Administrative Support Staff process and distribute incoming mail, create the application file, conduct a preliminary review of the application for completeness, and update the Applicant Tracking System (ATS) indicating the receipt of the application and supporting documents. Administrative Support Staff send the applicant a letter acknowledging receipt of the application and fees and provides the applicant the unique Applicant Tracking System (ATS) number.
- STEP 4: Review Staff conduct the initial review of the application and supporting documents. If an application is not complete, the Review Staff sends the applicant a deficiency notice. The applicant must submit corrected or additional documentation or contact the responsible entity to submit the additional documentation to MBC. The Review Staff can continue to process the application and required documents through the decision unless the application meets the criteria for Senior Review. Once the application is complete, the decision is made to issue a license or PTAL. An application file can be closed after one year if the applicant does not exercise due diligence and complete the application. Applications deemed ready for licensure or issuance of a PTAL receive a quality control review to verify the application is complete and approved. Review staff issue a PTAL.
- STEP 5: If an issue (such as a serious mental health issue, academic problem, dishonesty, or drug or alcohol use) is disclosed by the applicant or discovered during the Step 4 (the application review process), Senior



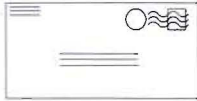
Review staff may require additional information. Senior Staff will conduct an additional level of application review. The licensure decision can be to:

- Issue a license or PTAL
 - Issue a probationary license
 - Issue a license with a public letter of reprimand
 - Deny the application
 - Close the application file after one year if the applicant does not exercise due diligence in the completion of the application
- STEP 6: If the licensure decision results in issuing a license, the license is issued to the applicant and the Web site updated with the license information.
 - STEP 7: Renewal staff process license renewals within two years of the issuance of the initial license and every two years thereafter.

Based on the information available and what was observed during the BPR Study, it appears that the current seven-step workflow described above is adequate at the current time.



3.1 Step 1: MBC Mailroom



Mailroom

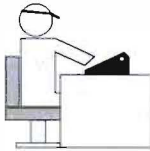
The mailroom at 2005 Evergreen Street distributes incoming mail for the Medical Board of California. Mail is sent either directly by the sender to the Evergreen location or to the Department of Consumer Affairs central mailroom 1625 North Market Blvd. The on-site mailroom at Evergreen Street is part of the MBC organization but was not part of the scope of the BPR Study.

The mail is sorted by MBC unit. If a check is enclosed, the check and all enclosures are forwarded to the Cashier for processing. If the mail does not contain payments, the mail goes directly to the Licensing Administrative Support Staff. Mailroom staff delivers all other mail to the appropriate MBC staff by early afternoon.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.2, page 127.



3.2 Step 2: Cashiering



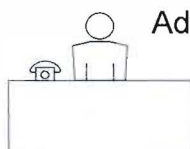
Cashiering

The Cashiering Staff sorts and processes four general types of mail in which money is included:

- **New application with a check included** – an ATS record is created, the check tendered and the application forwarded to the Administrative Support Staff Inbox for processing.
- **Check with no documents** – a copy of the check is made on 'hot pink' paper and forwarded to the Administrative Support Staff Inbox for the Review Staff to research. Once staff knows how to apply the check amount, the ATS record will be updated.
- **Fee invoices with check**– applies the payment amount to the corresponding ATS record. The check is tendered and the 'blue' fee invoice is forwarded to Licensing for distribution to the appropriate staff.
- **License renewal invoices with check**– fees received are recorded in ATS and then the Consumer Affairs System (CAS) record is updated to reflect payment of fees. The check will be tendered and the renewal invoice questionnaire will be scanned into CAS.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.3, Page 129.

3.3 Step 3: Administrative Support



Admin Support

Administrative Support sorts the mail and completes tasks common to all applications such as:

- Application file set-up
- Updating ATS with demographic information and qualification method



- Federation of State Medical Boards (FSMB) and American Medical Association (AMA) checks
- Fingerprint checks
- Generation of the letter acknowledging application receipt
- Preliminary review of application for completeness (no blank boxes or responses)

The Z-project staff is included in the Administrative Support staff and is responsible for logging all application-related documentation received at MBC into ATS and updating the Application Requirements Status Field in ATS with a "Z". The "Z" indicates the document has been received but not reviewed. This information updates the MBC Web site application, Web Applicant Access System. The Web Applicant Access System was launched on December 1, 2009 and allows the applicant on-line real-time information on their application status.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.3, page 129.

3.4 Step 4: Application Review



The Application Review process verifies that the PTAL and licensure requirements identified in California statutes and regulations have been met. Applications are reviewed by type of applicant – U.S. and Canadian medical school graduate (US/CAN) or International medical school graduate (IMG). Supporting documents are reviewed to determine if they meet the requirements (approved) or deficient.

The Application Review process includes:

- Conducting the initial review of the application and supporting documents



- Generating a deficiency notice if needed
- Processing incoming application documents
- Communication with applicant and support entities
- Assessing the need for Senior Staff Review
- Conducting final review prior to licensure

Quality Review is also a component of Application Review and occurs after the Application Review is complete and prior to Licensing. Review Staff issue PTALs. Applications approved for licensure are forwarded to Licensing (Step 6).

For the purposes of the MBC BPR Study, the role of the Fingerprint Coordinator is contained in the Application Review process. Any communication with the California State Department of Justice (DOJ), including fingerprint results, is done through the Fingerprint Coordinator.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.5, page 135.

3.5 Step 5: Senior Review



If an issue is disclosed by the applicant or discovered during the application review process, an application may be forwarded for Senior Staff review and additional documentation may be needed prior to making a PTAL or licensure decision. Examples of issues include serious mental health issues, academic problems, dishonesty and drug or alcohol use. A Senior Review results in the issuance of one of the following:

- Unrestricted license
- Probationary license
- Public Letter of Reprimand



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- Denial of application

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.6, page 138.

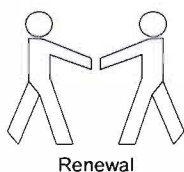
3.6 Step 6: Licensing



Once a license application review is complete and approved, the final step in the Licensing Process is licensing. A final check is made, the Applicant Tracking System (ATS) is updated, the Consumer Affairs System (CAS) is updated and a license is sent to the licensee.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.7, page 144.

3.7 Step 7: License Renewals



In contrast to the considerable amount of application and credentialing documentation review that is required for PTAL and initial licensures, the license renewal process is an automated process with only exceptions requiring a manual review and resolution. The figure below shows that over the past five fiscal years, MBC processed between 56,000 and 61,000 renewals annually with an increase since FY 05-06.⁵

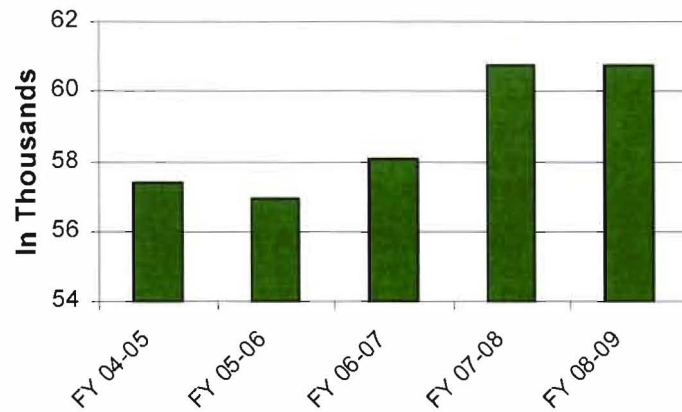
⁵ MBC Annual Reports 04-05 through 08-09



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Figure 9 - Total Licenses Renewed

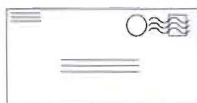


Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.8, page 146.



3.8 Observations

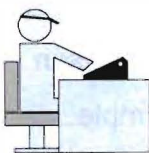
3.8.1 Observations – MBC Mailroom



Mailroom

1. The heaviest volume of mail is on the Monday after a Furlough Friday.
2. Mail is counted and logged on the first week of the month for shared services costs.

3.8.2 Observations – Cashiering



Cashiering

1. Incorrect fees are received by the Cashiering Unit – Additional staff time is required to process checks that are not consistent with any fees. It is thought that the Fee Schedule included in the application may be misinterpreted by the applicant. In addition, the BPR Study Team identified that the current Licensing Fee Invoice Form may cause confusion when received by the applicant.

3.8.3 Observations – Administrative Support



Admin Support

1. There is no centralized and permanent Administrative Support Staff manager - The current Administrative Support Staff performing the tasks identified in the Administrative Support process flows include individuals with Office Technician (OT), Retired Annuitant (RA) and Student Assistant (SA) classifications. Under the current Licensing Program organization, this staff is supervised by multiple managers making it difficult to provide centralized and consistent management. A temporary manager has been assigned starting October 1, 2009, but only through January 2010.



2. Diverse skill sets are required to complete tasks in Administrative Support processes - Application set-up and preliminary review tasks vary from very clerical tasks with minimal analysis (such as verifying all forms received, creating the "application received" letter) to tasks that are mostly clerical with some analysis of the application and supporting documentation (such as determining the Qualification Method).
3. Application files are not always completed in receipt date order in the Administrative Support Business Process - Applications are processed by Administrative Support Staff in the order they are received and a single Administrative Support Staff individual is responsible for completing all the tasks for each file. Each individual works at a different rate. This results in the Review Staff receiving files out of receipt date order. For example, application files with an application receipt date of the 15th may have all Administrative Support process tasks completed before an application with a receipt date of the 10th. The temporary manager assessed receipt and assignment of application set-up and revised the process to ensure all work is completed within three (3) working days.
4. The current staffing for the Z-project is heavily dependent on Student Assistants (SAs) - The Web Applicant Access System (WAAS) allows applicants to view application status online via the MBC Web site and uses the information input by Z-project staff, a part of the Administrative Support Staff. Although WAAS was implemented on December 1, 2009, the project required data entry starting in September 2009. Administrative Support Staff assigned to the Z-project update ATS with application and supporting document information. WAAS depends on timely and accurate entry of application and supporting documentation received at MBC. Turnover for Student Assistants is traditionally higher than turnover of permanent staff, resulting in an ongoing risk for projects that have a heavy concentration of Student Assistants. It is assumed this was not the original staffing plan, but



due to competing priorities, using Student Assistants became the only viable alternative as no existing permanent staff could be pulled from reviewing applications.

5. The current process allows multiple letters to be created and sent to an applicant - During the Administrative Support Process, if an application is missing fingerprints or the application is not filled out completely, a notice is sent in addition to an "application received" letter.
6. Performance metrics and objectives have not been established for Administrative Support Staff - The Administrative Support Staff tasks are an essential part of processing applications, but there are no metrics or performance objectives established for these tasks. Application files were not counted until they enter the Application Review Process. Starting in October 2009, the process was changed whereas received applications are counted when the application and fee are received and the method for licensure (pathway) is entered into ATS by Administrative Support Staff. Applications age from the receipt date at the start of the Administrative Support Process. Time spent on the Administrative Support process tasks accrue as part of the 60-working (90-calendar) day regulatory timeframe for completion of an application's initial review.

In addition, there is limited ability to measure the rate at which applications move from Administrative Support to Application Review. This flow must be managed so that staffing and performance objectives for both processes can be adjusted to address any variances in application receipt.

Review Staff interviews in early October identified that new application files are being received by the Review Staff up to three weeks after receipt date. As of December 1, 2009, it has been reported Administrative Support Staff is working on applications that are seven or less calendar days old.



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Work products from the Administrative Support Process have errors -

These errors can result in a delay in completing the initial review and additional work for the Review Staff. Effective November 2009, a quality review of Administrative Support Staff ATS input was instituted. There have not been quality metrics and objectives established for the Administrative Support Process.



3.8.4 Observations – Application Review



Application Review
(inc. Sr. Review and Licensing)

1. US/CAN application reviews are typically less complex and take less time - IMG application reviews require more time because US/CAN medical schools use standard curriculums and supporting documentation. IMG applications can have medical schools and clinical clerkships located anywhere in the world and the curriculum may not meet statutory and regulatory education requirements. As a result, an IMG's application and supporting documentation require more time and skills to review and assess. Often an IMG reviewer starts out as a US/CAN reviewer and is promoted to an IMG reviewer.
2. The Policies & Procedure Manual and Decision Log are used in review process - The current Policies & Procedures Manual used by Administrative Support Staff and Review Staff is intended to provide the course of action required to process the license and PTAL applications and all documentation supplied by the applicant and various entities in support of the application. The Decision Log is a "companion document" to the Policies & Procedures Manual, identifying approved clarifications or modifications to the Policies and Procedures Manual and other pertinent information.

Creation, publication and implementation of the initial Policies and Procedures Manual and the Decision Log within the past year was a significant effort and noteworthy accomplishment by the Licensing Program.

It is critical that the Policies & Procedures Manual and Decision Log be:

- Complete
- Comprehensive



- Easy to follow and understand
- Up to date and reflect current requirements and practices

Documents such as the Policies and Procedures Manual and the Decision Log are considered “living documents”. “Living documents” are refined through iterative processes that keep the documents current so they remain an effective tool for Licensing Program Staff. The Decision Log is updated as policy changes, but a process has not been established yet to incorporate the Decision Log into the Policies & Procedures Manual.

Interviews identified that the Policies & Procedures Manual is not complete, but the “core” application processes have been documented. The BPR Study Team believes this is the result of competing priorities and lack of dedicated full-time staff is delaying further work on the Policy & Procedures Manual and other infrastructure-related activities. The BPR Study Team will provide comments on the Policy & Procedures Manual separately from this report.

It is important that Review Staff adhere to the Policies & Procedures identified in the manual. Adherence promotes standard practices and predictable outcomes. Interviews identified that not all Review Staff adhere to the current Policies & Procedures but could not identify why. These deviations are identified during the Quality Review process.

3. The period between application receipt and the start of initial review allows required supporting documentation to be received and processed – BPR Study interviews indicated less than two percent (2%) of US/CAN and IMG applications are considered complete (application, fees and all necessary supporting documentation) at time of receipt. During the time period between application receipt and the start of initial review, supporting documentation is received from external entities, processed and matched up with the application file. At the time of initial review, a higher number of



applications are complete and fewer deficiencies are identified related to outstanding supporting documentation due to the period between application receipt and initial review. Metrics in November 2009 through mid-January 2010 indicate the percentage of applications assessed as complete at the time of initial review and sent straight to licensure average 24% for US/CAN and 5% for IMG. PTAL applications assessed as complete at the time of initial review was 9% for that same time period. .

Careful consideration must be given on how much to optimize the timeframe between application receipt and initial review. For example, if the time between application receipt and initial review was reduced to less than 60 days, it is assumed that more deficiency notices would be created due to missing supporting documentation adding to the overall Licensing Program workload.

4. For applications that have deficiencies and do not require Senior Review, it is estimated that between 70 – 75% of application processing is completed when initial review is completed - The remaining 25 - 30% includes processing the required supporting documentation to resolve the deficiency, quality review, final ATS updates and licensing. For applications that go straight to licensure, it is estimated that that 85-90% of application processing is complete when initial review is completed.
5. Significant effort has been made to meet initial review regulatory timeframes – Regulations⁶ require application have an initial review completed within 60 working days⁷ of receipt. Applications that have been awaiting initial review for over 60 working days (90 calendar days) are considered backlog. An overview of the backlog was discussed in Section 3 - Licensing and Postgraduate Training Authorization Letter (PTAL)

⁶ CCR Title 16 §1319.4 (a)

⁷ 60 working days equates to roughly 90 calendar days. Licensing Program documentation sometimes refers to initial review time in calendar days (days) .



Processes. The analysis of ATS data indicates that the backlog has been a recurring issue from as far back as FY 04/05. The recent backlog started in FY 07/08 Q2 and continued to increase through FY 08/09 Q4. A plan to reduce the backlog was established and implemented by the Licensing Program Chief in October 2009. The backlog was eliminated on December 23, 2009. Inventory must be monitored regularly to ensure a backlog is does not occur again. Metrics were recently put in place to monitor inventory and forecast workload 90 days in advance. The Licensing Program staff, ISB and the BPR Study Team are working together to use ATS data to generate the metrics and develop processes to more efficiently plan and monitor staffing, workload and inventory.

6. *It is assumed that the regulatory timeframe for MBC to render a licensure decision is being met* – Regulations⁸ require a licensure decision within 100 calendar days of the receipt of a completed⁹ application. The current structure of the ATS data does not easily allow reporting on processing timeframes after the initial review is completed. Analysis of the ad hoc reporting available during the BPR Study indicated the time MBC is waiting for the applicant to resolve deficiencies is included in the timeframe calculations. Wait time like this should not be included when assessing licensing processing timeframes, as the application is not yet complete and the wait time is outside the control of MBC. The BPR Study Team, Licensing Program Staff and ISB staff have initiated discussions on this issue and possible future options.

Because ATS data was not available to confirm regulatory compliance, the BPR Study Team used current workflow to assess the likelihood of regulatory compliance. If an application is incomplete upon initial review,

⁸ CCR Title 16 §1319.4 (b)

⁹ The definition of a completed application is not defined in regulations. The definition commonly used for a completed application is an application having all required information to render a licensure decision. The determination is made by MBC Review Staff.



the applicant is notified by letter of the deficiency (or deficiencies). The required supporting documentation received at MBC is processed and reviewed in the order it was received. The application review does not wait for all required documentation to be received before the application is reviewed.

If an application does not require Senior Review, an application is considered complete when the last document is processed and the reviewer confirms all deficiencies are resolved. The completed application is forwarded to Quality Review and licensed within five business days. The current workflow supports the assumption that the regulatory timeframe for rendering a licensure decision is being met for applications not requiring a Senior Review.

If an application requires a Senior Review, the application is forwarded to Senior Review staff. Additional supporting documentation may be required for Senior Review. The application is not considered complete until the additional supporting documentation for Senior Review is received and processed. Once all documentation is received, the Senior Review is conducted, a licensure decision is rendered and the applicant is informed of the licensure decision. The applicant has 30 days to request an Administrative Hearing if they wish to contest the licensure decision. The Deputy Attorney General (DAG) represents MBC at the Administrative Hearing at DOJ. A recommendation from the Administrative Hearing is forwarded to the Board for final licensure decision. This workflow supports the assumption that the regulatory timeframe for rendering a licensure decision is being met for applications requiring a Senior Review.

7. Review Staff workload is monitored to retain balance – Review staff workload is assigned by application type - US/CAN and IMG and then by first initial of applicant's last name. Letters of the alphabet with a smaller volume are grouped together to achieve a reasonably sized workload.



Licensing Program Management regularly reviews workloads and adjusts them to maintain a balance. Workloads were assessed and rebalanced in September 2008, July 2009, and again in early December 2009 when additional IMG staff was added. The next scheduled workload review is February 2010.

8. Reviewer's individual contact information is on outgoing correspondence to the applicant - This allows applicants to contact Review Staff directly. Although this provides a "personalized" approach, reviewers estimate that responding to phone calls and emails take up between two and four hours a day. Any changes made that decrease the amount of time spent on these tasks would increase the time available for application review tasks. The successful implementation of the WAAS project is expected to show a long-term decrease in application status inquiries.
9. Staff indicate there can be multiple calls for same issue, sometimes within the same day – Review Staff interviews indicate instances where the applicant, licensing service and others calling on behalf of the applicant call the Reviewer, sometimes within the same day, about the same issue (often application status inquiries). This increases the number of calls and the amount of time Review staff spend on tasks other than application review. Any changes made that decrease the amount of time spent on these tasks would increase the time available for application review tasks. The successful implementation of the WAAS project is expected to show a long-term decrease in application status inquiries. Once the backlog is eliminated, it is expected that these inquiries may decrease.
10. Metrics are not currently available or analyzed regarding Review Staff phone calls and emails - The implementation of the WAAS project is expected to show a long-term decrease in application status inquiries. Phone call metrics are available through the CIU, but these same metrics are not currently available for Review Staff phone calls. There are no



metrics on incoming emails to Review Staff. This limits the ability to accurately measure the overall impact of the WAAS project. As an alternative, Review Staff should be regularly surveyed to determine any changes to phone call and email volume.

11. Review Staff perform clerical tasks - Interviews with MBC Licensing

Program Staff identified that under the current workflow, there are clerical tasks performed by the Review Staff. These tasks may be more appropriate under the Administrative Support Staff functions. Examples include:

- Filing miscellaneous mail into an application folder - Currently “Miscellaneous Mail” (mail received in advance of MBC receiving the application) is delivered to Review Staff. In order to determine what Review Staff the Miscellaneous Mail should be delivered to, the mail is sorted consistent with current application assignments: US/CAN or IMG and first letter of last name. In some cases, it is easy to determine whether the mail is for a US/CAN or IMG applicant (such as a medical school transcript). In other cases, it is not easily identifiable and the Administrative Support Staff responsible for sorting the Miscellaneous Mail must make an educated guess. In this case, mail intended for an IMG application can be erroneously delivered to US/CAN Reviewer or vice versa. Review Staff holds the “Miscellaneous Mail” until the application file is received from Administrative Support Staff and is ready for initial review. At that time, the Review Staff goes through the “Miscellaneous Mail” looking for any documentation received related to that application. Part of the current process is that the Review Staff will check their “counterpart’s” Miscellaneous Mail if the applicant indicates that they have already sent the document.
- Making copies of any original documents sent as supporting documentation with the application. Any original documents submitted



with the application (such as medical school diploma) are required by regulations to be returned to the applicant¹⁰. A copy is made and put in the application file. A letter is generated itemizing what original documents are being returned to the applicant. The letter and any original documents are given to Administrative Support Staff to return by certified mail.

12. Supporting documentation received separately from the application may be delivered to wrong reviewer – A few types of supporting documentation do not easily identify the applicant as a US/CAN or IMG (For example Form L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training)), requiring Administrative Support Staff to determine which reviewer the mail should go to. As a result, mail can potentially be delivered to the wrong reviewer. To address this issue, reviewers check with their “counterpart” reviewer if an application file is missing supporting documentation prior to creation of a deficiency letters.

13. There is no License/PTAL application update form – If the applicant wants to update any information on the application initially submitted, the full application (L1A – L1E) must be resubmitted. The L8 form was used for updates and was discontinued several years ago, resulting in the use of the L1A-L1E for updates. BPR Study research could not identify the reason why the L8 form was discontinued. Current process requires Review Staff to compare the current application with the updated application. During BPR Study interviews, it was identified that using this application update method:

- Requires a significant amount of work (versus using an update form)
- Frequently results in a deficiency letter due to inconsistent or missing information other than the information being updated.

¹⁰ CCR Title 16 §1323(a)



14. Counts for “Applications Reviewed and Awaiting document” contains applications over one year old and PTALs – Current regulations¹¹

authorize MBC to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

BPR Study interviews indicate that:

- Due diligence determination is currently a manual process
- When MBC has notified applicants in the past of possible application closure, approximately 50% of applicants will respond, provide proof of due diligence and the file will remain open.

Applications meeting this criteria were identified in August 2009. Due to the Licensing Program focus on application processing and elimination of the backlog, applicants have not been notified and applications remain open and counted in the “Applications Reviewed and Awaiting Documents”. Applications counted in this category do not impact regulation processing timeframes because they are waiting for some type of applicant action (such deficiency resolution).

Applications that have PTALs issued also are counted in “Applications Reviewed and Awaiting Documents” and are discussed separately below in PTAL-related observations.

15. Application and instructions require review and modifications –

Recommended updates for the application have been compiled by Licensing Program staff. The recommendations are based on Review Staff experience, applicant and GME Program comments. Suggestions were also

¹¹ CCR, Title 16 § 1306



provided by newer staff during training sessions in September and October 2009.

The BPR Study Team reviewed the application and instructions and agrees with the previously identified need to revise the application and instructions. Research and interviews identified that application errors may be prevented with clearer and concise application and instructions. Application and instruction comments with recommendations developed by the BPR Study Team will be provided to the Licensing Program separate from this document.

16. PTAL-related observations – The PTAL observations have been grouped by subtopic to facilitate review of the information provided in this observation.

Statutes and Regulations

Current regulations¹² require IMGs who seek postgraduate training in California to obtain:

- A PTAL prior to enrollment in a California-based postgraduate training program. This is done to ensure the medical school and clinical training requirements have been met.
- Licensure by the end of the 36th month of training.¹³

PTALs are valid for one year from issue date. Currently, there is no limit to the number of times a PTAL can be renewed and no fees are assessed for PTAL renewals. Common problems with PTALs renewed multiple times are the increased likelihood that test scores will expire and placement in a

¹² Business and Professions Code § 2111 (PTAL), Business and Professions Code § 2102 (IMG Licensure)

¹³ MBC “Application and Licensing Physician and Surgeons, Frequently asked questions” – June 2009



postgraduate training program will be difficult. During BPR Study interviews, questions came up regarding the statutory and regulatory language related to PTALs. It is unclear if the PTAL was required to be renewed after a resident is enrolled in a California-based postgraduate training program.

How PTALs are identified in ATS

Starting in Q2 of Fiscal Year 05-06, a new Pathway (Qualification Method) was developed for ATS allowing PTAL applications to be identified separately. This allowed better data collection on PTAL applications. Process improvements continue for this pathway as it is important to identify and maintain data and improve the ability to track:

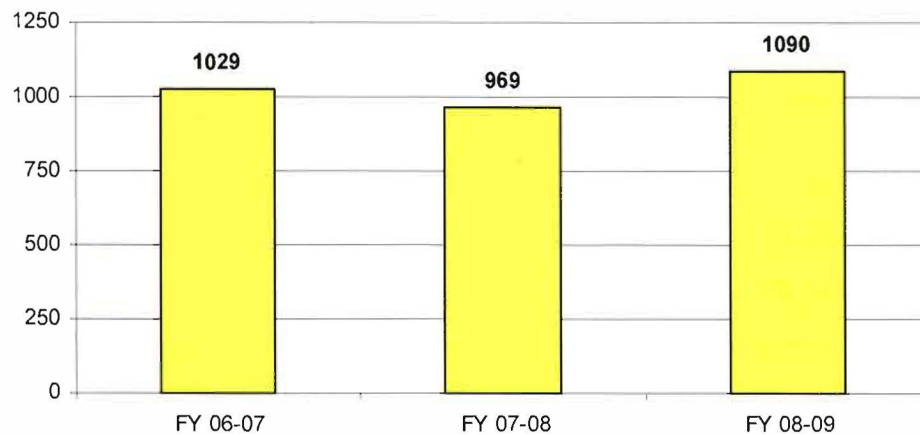
- The PTAL application from receipt to the issuance of a PTAL
- Any PTAL renewals
- The License application for an applicant that received a PTAL

PTAL Volume

Approximately 1,000 PTAL applications are received annually as indicated in the figure below. Based on annual application receipts of 6,000, about 15% of the all applications received are seeking a PTAL. Based on recent metrics, it is estimated that out of 1,000 PTAL applications received, at least 950 result in the issuance of a PTAL once the application is considered complete.



Figure 10 - PTAL applications received



Application receipt and processing metrics have always included PTALs and licenses. Prior to January 2009, metrics were only available for licenses issued. No automated method to capture PTALs issued (except those issued upon initial review) has been identified. Starting in January 2009, metrics for PTAL issuance have been manually collected and reported. Any past comparisons of applications received and licenses issued appear to be skewed as the applications received metrics included applications and PTALs, but only licenses issued were reported.

PTAL Processing

From a high-level, PTAL application processing is similar to license application processing. As shown in the table below, several of the same forms and documents are required for a PTAL application and a license application. Based on these similarities, it is reasonable to assume the level of effort to process a PTAL application is comparable to a license application.



Table 3 - Application Forms, Supporting Documentation and Fees

Application Forms Supporting Documentation Fees	PTAL App	IMG License App	US/CAN License App
L1A - L1E	✓	✓	✓
L2 - Certificate of Medical Education	✓	✓	✓
L3A/B - Cert of Completion ACGME/RCPSC Postgraduate raining		✓	✓
L4 - Cert of Current Post Grad Training Enrollment		✓	✓
L5 - Certificate of Clinical Clerkships	✓	✓	
L6 - Certificate of Clinical Training	✓	✓	
Fingerprints	✓	✓	✓
Official Exam Transcripts	✓	✓	✓
Medical School Transcript	✓	✓	✓
Certified Copy of Medical Degree	✓	✓	✓
Official Letters of Good Standing		✓	✓
Fees - App Fee \$493/ License Fee \$808 or \$416.50	✓	✓	✓
Original Official English Translation for Non-English documents	✓	✓	

Unlike an application resulting in licensure, an application file that results in the issuance of a PTAL remains open. The file is still considered active and counted as inventory awaiting action. The file must be retained by MBC for a minimum of one year and this requires time, effort and space to store these files. Within a year from issue date, PTAL holders must either:

- Renew the PTAL, or
- Notify MBC what Postgraduate Training program they are enrolled in through the Postgraduate Registration Form (Form 07M-157A).

PTAL Renewals

If the application is renewed (currently through the submission of a new L1A-L1E) or a Form 07M-157A (PGT Registration Form) has been received and processed, the application file continues to remain in an open status. An application file remains in open status for a minimum of one year after PTAL issuance and currently has no maximum. No statistics were available to analyze the frequency of PTAL renewals. After the applicant has completed



required postgraduate training, a license application is submitted and supporting documentation from the PTAL application, such as medical school transcripts and proof of clinical clerkships is used for the supporting documentation for the license application if the PTAL applicant seeks California licensure.

Based on current statutes and regulations, if the applicant has not renewed the PTAL or notified MBC after a year, the file may be closed after due diligence is completed ¹⁴.

Summary for the PTAL observation

In summary, the BPR Study has identified:

- Clarification is needed if PTAL requires renewal while applicant is enrolled in a residency program
- There is no limit to the number of PTAL renewals that can be issued. No fees are assessed for a PTAL renewal
- PTAL files remain open for a minimum of two years after a PTAL is issued and are counted in Licensing Program overall inventory while they remain open
- PTALs require additional data fields and/or programming in ATS to be effectively tracked
- PTALs require additional and extended tracking
- PTALs applications require an additional level of reporting compared with licenses applications
- There is a similar amount of documentation and effort required to process a PTAL and a license application, but the PTAL is inherently different than a license

¹⁴ CCR, Title 16, §1306.



17. Resource-related observations - Several resource-related observations were identified during the BPR study:

- a. *Budget Change Proposal (BCP) status* – A BCP is a proposal to change the level of service or funding sources for activities authorized by the Legislature, or to propose new program activities not currently authorized¹⁵. A BCP was submitted in June 2008 and the Governor's office approved 7.8 additional positions with the Licensing Program starting July 1, 2010. The 7.8 additional positions were needed to process the increase in the number of applications received over the past several years and maintain processing within regulatory timeframes.

During October and November 2009, additional staff was hired to eliminate the licensing backlog and maintain processing times within regulatory timeframes. In October 2009, six (6) Student Assistants and two (2) Retired Annuitants were hired. In November 2009, four (4) of the 7.8 new positions were hired on a temporary basis.

While the BCP adds one (1) supervisor and 6.8 new staff, there does not appear to be sufficient staff to complete infrastructure work identified in this report and process applications to comply with regulatory timeframes.

- b. *Resource management tools must continue to be refined* – Several resource management tools (forecasts, staffing plans, processes, objectives and metrics) were developed prior to the start or during the BPR Study based on the needs of the Licensing Program. It is anticipated these tools will continue to be refined through iterative use.

¹⁵ <http://www.dof.ca.gov/budgeting/>



- c. *Resource assignments and performance objectives are reviewed and adjusted monthly to effectively manage inventory and prevent a backlog* – Figure 2 – Quarterly view of applications received per month (average) shows the application receipts by FY quarters and identifies fluctuations in application receipts, requiring flexibility in resource management to address workload fluctuations. Based on the ATS data analyzed for FY 08/09, US/CAN application receipt has the highest quarterly variance, ranging from 630 (Q4 – April through June) to 1210 (Q3 – January through March). Monthly resource planning has evolved during the BPR Study to include forecasted application receipts, current application inventory, workload distribution and performance metrics. Resource planning processes should continue to evolve and mature through iterative use.
- d. *Current staff to manager ratio exceeds norm* – Typical staff to manager ratios range from 4:1 to 10:1 depending on type of work. Under the current Licensing Program organization, the staff to manager ratio for application processing is approximately 20:1. Two (2) managers (Staff Services Manager I (SSM1)) are responsible for the management of approximately 40 permanent and temporary staff.

The responsibilities and activities of the Licensing Program management are driven by the Medical Board's mission and current statutes and regulations (such as processing timelines). Addressing these responsibilities and completion of activities becomes more complex when managing resources that are:

- Not full-time (fractional resources),
- Changing (due to resignations, promotions or retirements),
- Less experienced,



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- Spread across multiple classifications,
- Assigned to different responsibilities, or
- Responsible for a variable workload

The BPR Study Team observed the existence of all of these factors in the Licensing Program organization, particularly in Administrative Support Staff and Review Staff.

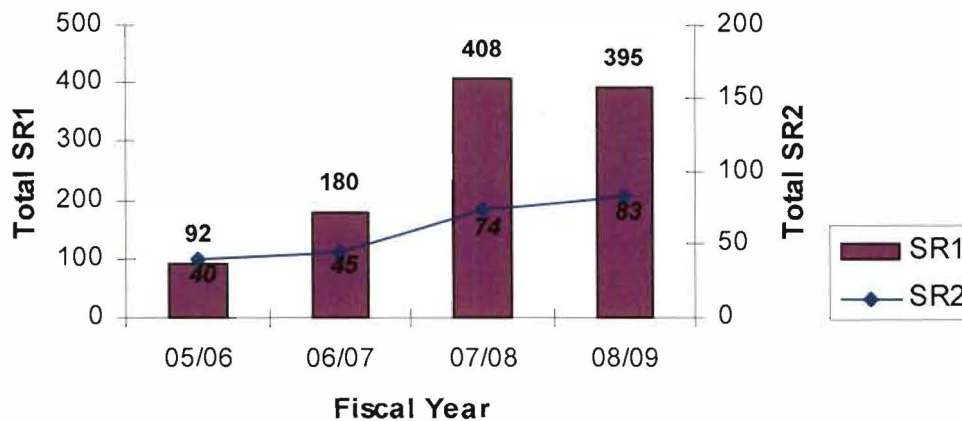


3.8.5 Observations – Senior Review



1. Since FY 05/06, there have been increases in Senior Reviews Level 1 (SR1) and Senior Reviews Level 2 (SR2). The Figure below shows that SR1s have had a greater increase since FY 05/06 than SR2s. This significant increase in SR1s and SR2s results in a comparable increase in workload for staff responsible for Senior Review.

Figure 11 – Total SR1 and SR2 files



FY	Total Applications Received	SR1 files	SR1 %	SR2 files	SR2 %
05-06	6090	92	1.51%	40	0.66%
06-07	6034	180	2.98%	45	0.75%
07-08	6192	408	6.59%	74	1.20%
08-09	6169	395	6.40%	83	1.35%

2. The SR1 criteria was re-evaluated in 2009. The Licensing Program evaluated SR1 criteria and determined that certain SR1 criteria did not pose a risk to public safety, such as applicants taking a leave of absence for



maternity leave. Select criteria was removed from the SR1 list. SR2 criteria was not changed.

3.8.6 Observations - Licensing



Application Review
(inc. Sr. Review and Licensing)

There are no observations or issues identified for the Licensing Process.

3.8.7 Observations - Renewals



Renewal

There are no documented policies and procedures for the License Renewal staff. This is not currently causing an issue because there

is minimal turnover in the staff responsible for license renewals, but should be addressed in the future. Documented policies and procedures ensure standard processes are identified, consistent information is provided and backup training is facilitated.

Renewal Staff currently reports to the Licensing Operations Manager and this function is grouped with allied health professional certificates and licenses.

Consideration should be given to move this function under the same manager as the Licensing function so that there could be increased communication and coordination related to the issuance of physician wall certificates and pocket identification cards.